(Col. 2) (Col. 1) FOR: NO. FILED NO. EXTRA **BASIC FEE** *5 **TOTAL CLAIMS** 25 - 20 *3 INDEP, CLAIMS 6 - 3 I MULTIPLE DEPENDENT CLAIM PRESENTED * If the difference in Col. 1 is less than 0, enter "0" in Col. 2.

SMALL ENTITY

RATE	FEE
	\$345.00
x \$9.00 =	\$45.00
x \$39.00 =	\$117.00
+ \$130.00 =	
TOTAL	\$507.00

Please charge Deposit Account No. 20-1430 as follows:

Filing fee [X]

- A copy of this transmittal is enclosed.

507.00

Any additional fees associated with this paper or during the pendency of this application.

[X]

Telephone:

Facsimile:

(415) 576-0200

(415) 576-0300

Respectfully submitted,

TOWNSEND and TOWNSEND and CREW LLP

MARK D. BARRISH

Reg. No.: 3 6,443 Attorneys for Applicant

PA 3093423 v1